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ABSTRACT

The paper reviews the history of assigning linguistic minority students to special education classes. The review begins with the Darwinistic view of J. Down who noted that the existence of "idiots" in European families was a throwback to lower developmental stages characteristic of the "Mongol race." Minority language groups and the disabled were also seen as a menace to society, as demonstrated by attempts to correlate prostitution, venereal disease, alcoholism and commitment to penitentiaries with disability. Measures to protect society, such as compulsory sterilization are described. Contributions of educational psychology to discriminatory practices with minority language children are also noted. Current practices such as assigning medical diagnostic labels to low school achievers with no clinical sign of handicap are cited as remnants of the social prejudice from an earlier era. (CL)

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SPECIAL EDUCATION AND LINGUISTIC MINORITY STUDENTS:

THE HISTORICAL BASES OF DISCRIMINATORY PRACTICES

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Special education and linguistic minority students:

The historical bases of discriminatory practices

In the late 1960's and early 1970's a significant overrepresentation of ethnic minority students in classes for mildly retarded students was documented across the United States (Dunn, 1968; Mercer, 1973). Since the initial recognition of this problem, attempts to change identification and classification procedures have focused on the technical adequacy of measurement instruments used by school psychologists. Yet, despite changes and the inclusion of additional criteria for labeling children, a disproportionate number of minority students continue to be labeled mildly handicapped (Finn, 1982; Tucker, 1980), suggesting that conceptual, rather than technical problems underlie inequitable placement.

The practice of assigning medical labels to slow learning students without other clinical signs of handicap began near the turn of the century. That era was characterized by a prevalence of prejudicial and stigmatizing attitudes towards both minority language speakers and persons who were genuinely disabled. The categorical system constructed by psychologists and educators at that time was influenced by these social attitudes, and the result was an expectancy among teachers, psychologists, and administrators that linguistic minority children were likely to be mentally handicapped. Current problems in the identification of mildly handicapped learners stem from the assumptions of this period.

The degenerate menace: Views of minorities and the disabled 1870-1930

Darwin's theory of evolution had a strong effect on attitudes towards the disabled and nonEuropean groups in 19th century England and America. The ethnocentrism that led Europeans to view themselves at the apex of the

evolutionary ladder also allowed them to identify nonEuropeans and the disabled as less genetically fit, hence a degeneration in the development of the human species.

Seven years after Darwin's Origin of Species first appeared, a London physician published an influential article entitled "An ethnic classification of idiots" (Down, 1866). Down noted that a large proportion of idiots were "typical Mongols" (p. 260), and concluded that the appearance of these children in European families was an instance of degeneration to the lower stage of development characterized by the "Mongol race". Down suggested that other ethnic groupings of idiots might be made based on characteristics of the "Ethiopian variety" and those of the native inhabitants of America (p. 260).

Porteus (1923) described a project he had initiated to study the mental ability of various ethnic groups in Hawaii. The purpose was "to discover the parallel, if any, which exists between the mentally retarded individuals in our own race and the groups of mankind that are racially retarded" (p. 84). Porteus felt that the information derived from the study of less intelligent groups could support the theory that retardation is caused by a survival of lower evolutionary characteristics within a more advanced group (those of northern European descent).

As late as 1944, the American Journal of Mental Deficiency published a study purporting to support Down's system of ethnic classification of the mentally handicapped. Davenport (1944) paid tribute to Down's "keen power of observation" (p. 339) but noted that scant attention had

been paid to Down's "Ethiopian type" of the mentally handicapped. Davenport investigated the hypothesis that an African feeble-minded type existed by studying the faces of eleven institutionalized retarded persons selected because of perceived similarities. He found "thick protruding lips and receding chin" (p. 342) common in his subjects as well as a collection of photographs of West African blacks.

The tenacity of Down's hypothesis is evident. Davenport's article, published in the country's leading journal on mental retardation, appeared seventy eight years after Down's initial attempt to link nonEuropean groups to mental retardation. The support generated by the hypothesis is indicative of the strength of the prejudice towards minorities that existed during this period.

Related to the (false) evolutionary perspective already described was the idea that minority language groups and the handicapped posed a menace to society. These groups were seen as threatening the gene pool of advanced countries by passing on low intelligence to their offspring. They were also held responsible for social problems, also believed caused by heredity.

Sir Francis Galton, pioneer in statistical measurement and mental testing, was also the creator of the term Eugenics, and a strong advocate of selective breeding to improve the human race. Like so many others of his time, Galton believed in the superiority of Europeans. His book on the heritability of mental ability includes the statement that: "the natural ability of which this book mainly treats, is such as a modern European possesses in a much greater average share than men of the lower races" (Galton, 1925, p. x). He feared the effect of social policies that

aided the poor and urged Eugenics upon mankind as a new religion.

H. H. Goddard, who directed the Vineland Training School for the Feeble-minded from 1906 to 1918, produced evidence that non-English speaking immigrants were a menace to America's gene pool. He studied the intelligence of Jews, Hungarians, Italians, and Russians arriving at Ellis Island after voyages in the steerage of ships. He concluded that forty percent of these immigrants had intelligence so low that they might be morons (Goddard, 1917).

Brigham (1923) produced a widely read book based on the intelligence testing of United States soldiers in World War I. Brigham found Americans with ancestry from northern and western European countries to be more intelligent than others. Minority language groups recently arrived from Poland, Russia, and Italy were deemed unintelligent. Brigham reached this alarming conclusion: "...American intelligence is declining, and will proceed with an accelerating rate as the racial admixture becomes more and more extensive" (p. 210).

The social menace of minority language groups and the feeble-minded was feared as a result of other characteristics that were believed to derive from low intelligence. So it was that Terman (1917) wrote that feeble-mindedness was a menace "to the social, economic, and moral welfare of the state" (p. 161). He claimed that it was responsible for one fourth of the commitments to state penitentiaries and reform schools, for the majority of cases of chronic poverty, and for a large proportion of reported prostitution, venereal disease, and alcoholism. Goddard (1919) went even further. He stated that the "high grade defectives" he labeled morons played a part "in all social problems" (p. 124).

The Association of Medical Officers of American Institutions of Idiotic and Feeble-minded Persons (now known as the American Association on Mental Deficiency) also perceived a link between mental retardation, immigration, and social problems. A delegate to the annual conference held in 1888 stated that: "We shall ever welcome the vitality and nobility of the best Celtic, Saxon, Germanic, and Scandinavian blood of Europe, but if the sewage of vice and crime and physical weakness is to pour in upon us from the east, and more nameless abominations to come in like a flood from the west, we are helpless. We cannot build prisons, reformatories, insane retreats, and idiotic asylums fast enough and large enough for our needs" (quoted in Sloan & Stevens, 1976, p. 17).

The Association's 1909 journal edition carried an article written by a Reverend Schwartz which warned against the dangers of the degenerate class who were: "a standing menace to the race, making possible the transmission, through the individuals of this class, to unborn generations, habits of viciousness, immorality, and incompetence" (Schwartz, 1909, p. 75).

Measures to combat the menace

Given the strength of the fears aroused by perceptions of feeble-minded immigrants at this time, it is not surprising that strong measures were advocated to protect society. While the Reverend Schwartz (1909) advocated death for those identified as abnormal, few others went so far. Most persons concerned about the menace of the feeble-minded immigrant recommended the passage of restrictive immigration laws, implementation of Eugenic measures through compulsory sterilization of the feeble-minded,

and separation of the feeble-minded in institutions.

Restrictive immigration was advocated by many psychologists including Goddard, Terman, and Brigham (Chase, 1980).

This scientific support was helpful in convincing Congress to act, and a law discriminating against immigrants from countries outside of northern Europe was passed in 1924.

The Eugenics movement recruited many respected advocates in the early decades of the century. Theodore Roosevelt supported Eugenics, while Winston Churchill and Alexander Graham Bell were vice-presidents at the First International Conference of Eugenics in London in 1912 (Chase, 1980). As early as 1907 state legislatures began considering and passing compulsory sterilization laws for the inmates of institutions. In various states it became legal to sterilize persons considered to be mental defectives, epileptics, syphilitics, and "hereditary" criminals. By 1961, 32 states and Puerto Rico had sterilization statutes in force (Lindman & McIntyre, 1961).

Separation of mentally retarded individuals was advocated in the published objectives of the American Association on Mental Deficiency. The July 1944 issue of the Association Journal included (among others) the following objectives:

"The construction of institutions for the feeble-minded.

Extra-institutional supervision of all defectives in the community.

The segregation of mentally deficient persons in institutional care and training with a permanent segregation of those who cannot make satisfactory social adjustments in the community" (p. 1).

These objectives followed naturally from the view that the feeble-minded posed a menace to the normal members of society. Eugenics and restrictive immigration were also seen as logical responses to the perceived increase in the feeble-minded due to immigration.

Educational psychology and the minority language child: 1900-1940

Educational psychologists were convinced that some minority language groups were inherently unintelligent. Terman (1916) described Mexican-Americans and Indians as "racially dull." He stated that: "children of this group should be segregated in special classes and be given instruction which is concrete and practical" (p. 91-92).

The Italian American group was consistently singled out for having low mental ability. Pintner (1923) found that although differences between Italian American and "native" American groups were overestimated by verbal mental tests, the Italian American group was still lower in ability. Goodenough (1926) suggested that the "squalor" of Italian American slums was a result of that group's low intelligence.

Garretson (1928) lent support to Terman's contention that Mexican Americans were unintelligent. He studied the rate of retardation in moving from grade to grade for Anglo and Mexican American children in a southwestern school district. Finding a discrepancy between groups in favor of Anglos, he concluded that lower intelligence of the Mexican American group best explained the discrepancy.

Even linguistic differences were interpreted by educational psychologists as evidence of low mental ability. For example, Goddard (1923) noted that teachers should not conclude that inability to learn

in school is caused by the inability to speak English. Goddard felt that the lack of English and the low school achievement might both be caused by feeble-mindedness - he recommended that teachers not be deceived by this "mask." Goodenough (1926) correlated foreign language maintenance in the home with intelligence test scores and found a high negative correlation between maintenance and intelligence. Rather than seeing the correlation as a result of bias against limited English speakers in intelligence tests, she concluded that groups with more language maintenance were less intelligent, and hence less able to learn English.

While not speaking English was considered evidence of a handicap, so was bilingualism. Manuel & Wright (1929) suggested that learning two languages caused a dual handicap evident in both languages. The theory received support from Smith (1939) who found bilingual Hawaiian preschool children to be retarded in their overall language development compared to monolingual speakers of English. Other investigators measured the effects of speaking another language on intelligence test scores. Rigg (1928) and Mitchell (1937) noted that limited proficiency in language of the test lowered obtained scores, and referred to the language difference as a "handicap" (rather than an instance of inappropriate testing).

Educational psychology supported the notion that minority language students were likely to be slow learners, if not because of low mental ability, then because of the disadvantage accrued by their language "handicap." These views of minority language learners were incorporated into early special education categorical definitions.

Limited English proficient children and the growth of special education

Several factors intertwined at the turn of the century to create a need for ungraded special classes in the schools of large American cities. These included the enforcement of compulsory schooling, the use of a lock-step promotion system, and the influx of large numbers of nonEnglish speaking immigrant schoolchildren (Sarason & Doris, 1979). Before compulsory education was enforced, children who found school too difficult (for any number of reasons) could just stop attending. The lock step grading system meant that at the end of the year everyone was expected to move to the next grade. But with compulsory schooling and large numbers of nonEnglish speaking children in the schools, there was a growing group of students unable to make the academic progress required for promotion.

The New York City school system responded with the creation of its first ungraded class in 1899, populated by children who were considered truant, or mentally, physically, or morally defective (Farrell, 1909). By 1902, W. H. Maxwell, school superintendent was able to describe New York's initial categorical system. It was composed of: "defective children", "idiotic or permanently defective children", and "dull children." It is this last category that is most relevant to the minority language child, for its definition, cited in full, read: "those who are behind in any or all studies; those who exhibit abnormal precocity in one or more studies; those who have lost time because of irregular attendance or frequent transfer; those who are deficient in

English because of foreign birth and residence." (emphasis mine;

Fourth Annual Report of the City Superintendent of Schools, 1902).

The ungraded classes were not created with reference to a theory, but to meet the needs of a school system whose normal procedures could not accomodate previously excluded children and those with different linguistic backgrounds. The categorical labeling of these children may be understood as an attempt to confer medical validity to classifications derived out of social necessity. Prevailing social attitudes towards nonEnglish speakers, reflected in the educational psychology of the time, provided legitimacy to the new categorical approach.

Richardson (1979) showed that medical labels used to classify and separate students in California, evolved from exemptions initially based on race. Regulations establishing separate schools for black, Chinese American, Japanese American, and Indian children were all written separately, prior to the creation of public special education for mentally retarded children. The introduction of special services for mentally retarded children in 1947, coincided with the repeal of laws separating children by ethnic background. The medical label of mental retardation permitted segregation of minority students within schools that were no longer legally permitted to exclude them.

The development of special education in both New York City and California can be seen as a consequence of compulsory education legislation interacting with strong stigmatizing attitudes towards minority groups and the handicapped. Such an analysis explains the expectancy in teachers, psychologists, and administrators that allowed gross overrepresentation of minority students in classes for the handicapped

to go unchallenged from the turn of the century until the late 1960's. The disproportionate number of labeled minority students was not seen as a problem, but as a predictable and necessary occurrence.

Current issues and the legacy of the past

It is tempting to dismiss the excesses of the past as irrelevant to the concerns of the present. Yet many current unresolved issues in special education can be traced to practices originating in the historical period described. Social prejudice is less respectable than it was at the turn of the century, but continues to affect education.

A study that manipulated the ethnic group of a fictitious student's file found that teachers perceive placement in a class for the mildly retarded to be more appropriate for a Mexican American than an Anglo child (Zucker, Rutherford, & Prieto, 1979). Overrepresentation of minority children exists in classes for mildly retarded exists in all but four of the fifty states, and is especially pronounced in some areas where prejudicial attitudes towards minorities are strong: blacks are highly overrepresented in the south, and the same is true for Mexican Americans in New Mexico, and Indians in Alaska (Heller, Holtzman, & Mesick, 1982).

Despite the passage of Public Law 94-142, the continued separation of children labeled handicapped from nonlabeled peers remains a problem in many areas. Many teachers remain opposed to mainstreaming of handicapped children, and downgrade their potential (Alexander & Strain, 1978). Overall, the handicapped remain strongly stigmatized within the United States (Gliedman & Roth, 1980).

Most problematic of all is the continued practice of giving medical

diagnostic labels to low school achievers with no clinical signs of handicap. The most widely used tests to identify learning disabled children show little empirical validity for that purpose (Coles, 1978). Children labeled learning disabled, in general, do not appear to be different than other low achieving students (Ysseldyke, Algozzine, Shinn, & McGue, 1982). There is no distinctive instruction for children labeled learning disabled or mentally retarded; evidence suggests that effective instruction for one group is effective for the other (Heller, et al., 1982). The separation of children into mildly handicapped categories is not empirically tenable (Heller, et al., 1982).

Continuing attempts to find medical classifications for low achieving children, in the face of mounting evidence that the categories used lack validity, suggest that historical mistakes are being repeated. Misplacement of minority children in special education is due to defects in the assumptions that special education has been built upon, as well as on faulty instruments. Social prejudice, and the practice of assigning handicapped status to low achievers lacking other clinical symptoms of disability, are likely to continue the disproportionate representation of minority children in special education. New approaches, rather than new tests are needed.

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